

UNITED STATES DEPARTMENT OF THE INTERIOR  
NATIONAL PARK SERVICE  
INDEPENDENCE NATIONAL HISTORICAL PARK  
313 WALNUT STREET  
PHILADELPHIA, PA 19106

APPLICATION/PERMIT - WEDDING PHOTOGRAPHS

APPLICANT: Type/print in black ink the information requested in items 1 - 7. After completing all items, sign and date the certification in item 8 and return this application along with a check or money order for the application charge of \$50.00. Make the check/money order payable to Independence National Historical Park, and forward to: Independence National Historical Park, 313 Walnut Street, Philadelphia, PA, 19106, Attn: Special Events Office.

1. APPLICANT Name: \_\_\_\_\_  
Street/Address: \_\_\_\_\_  
City/State/Zip Code: \_\_\_\_\_  
Phone No.: Day (     ) \_\_\_\_\_ Evening (     ) \_\_\_\_\_  
Fax: (     ) \_\_\_\_\_
2. PHOTOGRAPHER Name: \_\_\_\_\_  
Street/Address: \_\_\_\_\_  
City/State/Zip Code: \_\_\_\_\_  
Phone No.: (     ) \_\_\_\_\_
3. Date Requested: \_\_\_\_\_ (Month/Day/Year)
4. Time Requested: First Choice: \_\_\_\_\_ (am/pm)     Second Choice: \_\_\_\_\_ (am/pm)  
Note: Time will be limited to one hour.
5. Area Requested: First Choice: \_\_\_\_\_     Second Choice: \_\_\_\_\_
6. Maximum number of participants expected: \_\_\_\_\_ (if unsure, please provide an estimate.)
7. Name of person who will be in charge of the event on-site: \_\_\_\_\_ Phone Number: (     ) \_\_\_\_\_  
Note: The person named here shall be the one who has full authority to make any on-site decisions about the event.
8. The applicant by his or her signature certifies that: 1) all the information given is complete and correct, and that no false or misleading information or false statements have been given; and 2) the attached terms and conditions have been read, are understood, and will be complied with fully.

Signature of Permittee (Do not print) \_\_\_\_\_ Date \_\_\_\_\_

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PERMIT - WEDDING PHOTOGRAPHS

As Authorized by Title 36, Code of Federal Regulations, Chapter 1, Section §2.50, permission is hereby granted to take wedding photographs subject to the terms and conditions of this permit.

General PERMIT CONDITIONS - See Attached Pages. Specific Terms, Conditions, or Limitations Applicable to this Permit:

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APPROVED BY: \_\_\_\_\_  
Signature of Park Representative     Title     Date

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PARK USE ONLY: (Distribution) R&VP: \_\_\_\_\_ PERMITTEE: Mailed / Faxed / Received \_\_\_\_\_

Application Charge Paid: \_\_\_\_\_ Date: \_\_\_\_\_